

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		626177	1-8-01
RESPONSE FORMALITY REVIEW		64645	3-13-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	N
2	N
3	N
4	N
5	N
6	N
7	N
8	N
9	N
10	N
11	N
12	N
13	N
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	N
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	N

Claim	Date
Final	
Original	
51	N
52	N
53	N
54	N
55	N
56	N
57	N
58	N
59	N
60	N
61	N
62	N
63	N
64	N
65	N
66	N
67	N
68	N
69	N
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89	N
90	N
91	N
92	N
93	N
94	N
95	N
96	N
97	N
98	N
99	N
100	N

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
 staple additional sheet here

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